



# Business Training Center/WATR Registration Form

Student Name \_\_\_\_\_  
Last (Surname) First Middle Initial

Student ID Number \_\_\_\_\_ Birthdate \_\_\_\_\_ MM-DD-YYYY

Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Email Address \_\_\_\_\_

Cell Phone \_\_\_\_\_ Home Phone \_\_\_\_\_

Previous Name(s) \_\_\_\_\_

Male  Female

Quarter you plan to start:  SUM  FALL  WTR  SPR **20**\_\_\_\_

**Social Security Number** \_\_\_\_\_  I refuse or am unable to provide my SSN/ITIN at this time. Initials: \_\_\_\_\_

**A. DISCLOSURE STATEMENT:** To comply with federal laws, we are required to ask for your Social Security Number (SSN) or Individual Taxpayer Identification Number (ITIN). If you do not submit your SSN/ITIN, you will not be denied access to the college; however, you may be subject to civil penalties (refer to Internal Revenue Service Treasury Regulation 1.6050S-1 (e)(4) for more information) of a \$50 fine in the event of an audit. If you choose not to provide your SSN/ITIN please check the "I refuse..." box above and write your initials on the line provided.

**B.** Services are available for students who have special needs due to a disability. Would you like our SSD staff to contact you with more information?  Yes  No

<b>C. Last High School attended</b>	<b>State/Country</b>	<b>Years Attended:</b> ____ to ____ <b>Graduated?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No
<b>Last college, voc/tech, university attended</b>	<b>State/Country</b>	<b>Years Attended:</b> ____ to ____ <b>Graduated?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No

**Are you a U.S. Citizen?**  Yes (skip to section E)  
 No (check the appropriate box below to indicate your status)

- D.**
- Immigrant/Permanent resident (IM)
  - Refugee/Parolee/Conditional Entrant (RF)
  - Visa holder; My visa type is: \_\_\_\_\_  
If your visa type is B, F, J, M, or TN, you must go to the **International Student Services Office** for admission.  
If your visa type is A, E, G, H, I, K, L, or R, the **Enrollment Services Office** will admit you.
  - Other (please explain): \_\_\_\_\_

**Business Training Center**  
3008 100<sup>th</sup> ST SW  
Everett, WA 98204

**Email:** btc@edcc.edu  
**Phone:** (425) 640-1840  
**FAX:** (425) 267-5749

www.the-btc.com  
www.washingtonaerospace.com

Edmonds Community College does not discriminate on the basis of race, color, national origin, sex, disability, sexual orientation or age in its programs and activities. The following person is designated to handle inquiries regarding non-discrimination policies:  
Vice President of Human Resources,

20000 68<sup>th</sup> Ave W, Lynnwood, WA 98036, (425) 640-1647.

Class registration - Description	ITEM NUMBER (4-DIGITS)	Start Date	End Date	Price
E.				

**Which race(s) do you consider yourself to be? (Optional) (Mark up to two boxes)**

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Alaska Native (015)             | <input type="checkbox"/> Cambodian (604)        | <input type="checkbox"/> Indonesian (610)              | <input type="checkbox"/> Samoan (655)     |
| <input type="checkbox"/> American Indian (597)*          | <input type="checkbox"/> Chinese (605)          | <input type="checkbox"/> Japanese (611)                | <input type="checkbox"/> Taiwanese (606)  |
| <input type="checkbox"/> Arabian (801)                   | <input type="checkbox"/> Eskimo (935)           | <input type="checkbox"/> Korean (612)                  | <input type="checkbox"/> Thai (618)       |
| <input type="checkbox"/> Asian, Indian (600)             | <input type="checkbox"/> Fijian (676)           | <input type="checkbox"/> Nepali (635)                  | <input type="checkbox"/> Tlingit (017)    |
| <input type="checkbox"/> Asian, Other (621)              | <input type="checkbox"/> Filipino (608)         | <input type="checkbox"/> Pacific Islander, Other (681) | <input type="checkbox"/> Vietnamese (619) |
| <input type="checkbox"/> Black or African American (872) | <input type="checkbox"/> Hawaiian, Native (653) | <input type="checkbox"/> Pakistani (616)               | <input type="checkbox"/> White (800)      |

Other Race: \_\_\_\_\_

\* If American Indian, please list name of enrolled or principal tribe: \_\_\_\_\_

**Are you of Spanish/Hispanic origin? (Optional) (Please mark only one box)**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> No, (not Spanish/Hispanic) (999)   | <input type="checkbox"/> Yes, Mexican, Mexican-Am., Chicano (722) | <input type="checkbox"/> Yes, Spanish (731) |
| <input type="checkbox"/> Yes, Central American (704)        | <input type="checkbox"/> Yes, Puerto Rican (727)                  |   |
| <input type="checkbox"/> Yes, Cuban (709)                   | <input type="checkbox"/> Yes, South American (729)                |   |
| <input type="checkbox"/> Yes, other Spanish/Hispanic: _____ |   |   |

**How long do you plan to attend Edmonds Community College?**

- |  |  |
|--|--|
| <input type="checkbox"/> One quarter (11)  | <input type="checkbox"/> Up to two years, no degree planned (14) |
| <input type="checkbox"/> Two quarters (12) | <input type="checkbox"/> Long enough to complete a degree (15)   |
| <input type="checkbox"/> One year (13)     | <input type="checkbox"/> Don't know (16)                         |

**What is your current work status while attending college?**

- |  |  |
|--|--|
| <input type="checkbox"/> Full-time homemaker (11)                                | <input type="checkbox"/> Part-time on campus (14)                  |
| <input type="checkbox"/> Full-time employment (including self and military) (12) | <input type="checkbox"/> Not employed, but seeking employment (15) |
| <input type="checkbox"/> Part-time off-campus (13)                               | <input type="checkbox"/> Not employed, not seeking employment (16) |

**What is your prior level of education at entry to Edmonds Community College?**

- |   |   |
|---|---|
| <input type="checkbox"/> Less than high school graduation (11)                    | <input type="checkbox"/> Certificate (less than two years) (15) |
| <input type="checkbox"/> GED (12)   | <input type="checkbox"/> Associate degree (16)                  |
| <input type="checkbox"/> High school graduate (13)                                | <input type="checkbox"/> Bachelor's degree or above (17)        |
| <input type="checkbox"/> Some post high school, but no degree or certificate (14) |   |

**What was your family status when you started at Edmonds Community College?**

Were you...

- |  |
|--|
| <input type="checkbox"/> a single parent with children or other dependents in your care (11) |
| <input type="checkbox"/> a couple with children or other dependents in your care (12)        |
| <input type="checkbox"/> without children or other dependents in your care (13)              |

**Note: If you wish to take college classes that are not part of the BTC/WATR program, you will need to complete a new college admission application.**

I hereby certify under penalty of perjury under the laws of the state of Washington RCW 9A.72.085 that to the best of my knowledge, all statements on this form are true and correct.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

OFFICE USE ONLY							
SSN/NAME CHECK	RESIDENCY CODE	FEE PAY STATUS	LETTER GIVEN	DATE ENTERED	ENTERED BY	AUDITED DATE	AUDITED BY
	2	02	N/A				

Print Name: \_\_\_\_\_ Student ID Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_